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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/537,356	06/03/2005	Klaus Dietzel	26794U	2653
34375 7590 05/13/2008 NATH & ASSOCIATES PLLC 112 South West Street Alexandria, VA 22314				
EXAMINER JEAN-LOUIS, SAMIRA JM				
ART UNIT		PAPER NUMBER		
1617				
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary

Application No.

10/537,356

Applicant(s)

DIETZEL ET AL.

Examiner

SAMIRA JEAN-LOUIS

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Period for Reply -- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 04 February 2008.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 6-11 and 13-17 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 6-11 and 13-17 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
- Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
- Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☐ Information Disclosure Statement(s) (PTO-8508)
- 4) ☐ Interview Summary (PTO-413)
- 5) ☐ Notice of Informal Patent Application
- 6) ☐ Other: _____
- Paper No(s)/Mail Date _____

DETAILED ACTION

The Examiner for this application at the USPTO has changed. Examiner Samira Jean-Louis can be reached at 571-270-3503.

Response to Amendment

Priority

Acknowledgment is made of applicant's claim for foreign priority. It is noted, however, that applicant has not provided English translation of the German application or European application as required by 35 U.S.C. 119(b). Nonetheless, the earliest priority date of the instant invention is December 12, 2002. However, without the English translations, one cannot ascertain if the instant invention is present in the German or European applications. Therefore, art prior to the PCT date, but not before the date of the German and European applications may be cited against the claims.

This Office Action is in response to the amendment submitted on 02/04/2008. Claims 6-11 and 13-17 are pending in the applications, with claims 1-5, 12, and 18-24 having being cancelled. Accordingly, claims 6-11 and 13-17 are being examined on the merits herein.

Applicant's arguments against the 35 USC 102(e) rejection of claim 6 have been considered and are found persuasive. Consequently, the 102 (e) rejection of claim 6 is withdrawn. Likewise, applicant's arguments against the 35 U.S.C. 103 (a) rejection of claims 1-10 and 18-20 has been considered and is not persuasive. However, given that

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the claim limitation of claim 6 was not clearly established in the 103 (a) rejection, a modified 103 (a) rejection is being made below.

Applicant's argument against the 103 (a) rejection of claims 11-17 has been considered but is not found persuasive. Specifically, Postma et al. teaches efficacy and utility of ciclesonide in asthma patients by administering a single dosing regimen of a powder inhaler using the R-epimer of ciclesonide at 200 µg (see abstract and pg. 1083, Introduction Section). Postma et al. further teaches that ciclesonide exists as two epimers with different receptor affinities and metabolization rates, so one of ordinary skill in the art at the time of the invention would have been motivated to use the highest amount of the R-epimer of ciclesonide since Postma et al. teaches the R-epimer as having greater pharmacokinetic profile. While Postma et al. did not teach the combination use of ciclesonide and formoterol, Maesen et al., however, teaches the use of inhaled formoterol to significantly reduce airway resistance in patients suffering from airway disease including asthma and chronic obstructive pulmonary disease (COPD; see pg. 1103, Introduction section). Maesen further teaches the use of 6 or 24 µg of formoterol in a single daily dose which led to improvement in breathing (pg. 1005, table 2, pg. 1106, fig. 2 and pg. 1107, fig. 3). Given that Postma et al. teaches the R-epimer of ciclesonide for asthma patients, and Maesen et al. teaches the use of formoterol for patients suffering from airway diseases including asthma, one of ordinary skill would have found it obvious to combine the two compositions and administer them either sequentially or simultaneously (i.e. fixed or free combination) since they both teach their

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composition for the same therapeutic method of airway diseases. Moreover, it is prima facie obvious to combine two methods each of which is taught by the prior art to be useful for the same purpose, in order to form a third method to be used for the very same purpose, the idea of combining them flows logically from their having been individually taught in the prior art. See *In re Kerkhoven*, 626 F.2d 846, 850, 205 USPQ 1069, 1072 (CCPA 1980) **MPEP 2144.06**.

Applicant's argument against the 103 (a) rejection of claims 21-24 has been considered and is found persuasive. Consequently, the 103 (a) rejection of claims 21-24 are withdrawn. However, given that the claim limitation of claims 21-24 were not clearly established in the 103 (a) rejection, a modified 103 (a) rejection is being made below.

Thus, in view of applicant's amendment to the claims, the 35 USC 102 (e) 103(a) rejections of claims 6 and 21-24 are withdrawn and the following 103(a) Non-Final rejections of these amended claims are being made.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

Claims 6-11 and 13-17 are rejected under 35 U.S.C. 103 (a) as being unpatentable over Magee et al. (2002/0111495 A1) in view of Calatayud et al. (U.S. 5,482,934).

This application currently names joint inventors. In considering patentability of the claims under 35 U.S.C. 103(a), the examiner presumes that the subject matter of the various claims was commonly owned at the time any inventions covered therein were made absent any evidence to the contrary. Applicant is advised of the obligation under 37 CFR 1.56 to point out the inventor and invention dates of each claim that was not commonly owned at the time a later invention was made in order for the examiner to consider the applicability of 35 U.S.C. 103(c) and potential 35 U.S.C. 102(e), (f) or (g) prior art under 35 U.S.C. 103(a).

Magee et al. teaches compounds of formula I useful as inhibitors of PDE4 in the treatment of diseases especially asthma, chronic bronchitis, and chronic obstructive pulmonary disease (abstract and pg. 1, paragraph 0006). Magee et al. further teaches that the compounds may be made in a composition together with a pharmaceutical carrier for treating a number of disease including bronchitis, obstructive bronchitis, COPD, allergic asthma and bronchial asthma (instant claim 15; see pg. 32, paragraphs 0190-0194). Magee et al. further teaches the combination of a compound of formula I

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together with one or more therapeutic agents including formoterol and ciclesonide (see pg. 34, paragraph 0218, and pg. 98, paragraphs 0620, 0630, and 0636). These compounds and therapeutic agents are administered to a patient in combination with the compounds of formula I where they are sequentially administered where each component is formulated apart from each other into separate dosage forms which are ingested at consecutive times by said patient with a significant time interval in between each ingestion (i.e. free combination administered successively; instant claims 6 and 11; see pg. 92 paragraphs 0571-0572). The compounds and therapeutic agents according to Magee et al. may be in the form of salts or acid salts including acetate, citrate, fumarate, gluconate, hydrochloride, hydrobromide, nitrate, sodium phosphate, stearate, sulfate, sulfosalicylate and tartrate (instant claims 9-10; see pg. 99-100, paragraphs 0672, 0674 and 0676) and may be administered in various dosages and follow various treatment regimen depending upon a variety of factors including drug combination, age, body weight, general health, sex, diet, time of administration, rate of excretion, physician's judgment and severity of the disease (instant claims 11, 16-17; see pg. 99, paragraph 0671). Finally, Magee et al. teaches that the pharmaceutical composition may be administered by nasal aerosol or inhalation through the use of a dry powder inhaler (instant claims 6, 11 and 14; see pg. 104, paragraphs 0709 and 0719).

Magee et al. does not specifically teach the R-epimer in an amount greater than 95% in the pharmaceutical composition.

The chemical structure shows a steroid nucleus with a quaternary ammonium salt group at C-3. The group consists of a trimethylammonium cation (N⁺(CH₃)₃) linked via a carbonyl group to a methylene chain, which is further linked to an ether group (O-R₂). The steroid nucleus has a methyl group at C-10, a hydroxyl group at C-14, and a methyl group at C-13. The quaternary ammonium group is attached to the C-3 position.

Thus, to one of ordinary skill in the art at the time of the invention would have found it obvious to utilize the R-epimer into the composition of Magee et al. to treat airway diseases since Calatayud et al. teaches that the R-epimer possesses intense glucocorticoid activity with minimal systemic effects. Given that Magee et al. teaches a pharmaceutical composition comprising compounds of formula I together with ciclesonide and formoterol, and Calatayud et al. teaches R-epimers of ciclesonide with

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high glucocorticoid activity, anti-inflammatory activity and minimal systemic effects, one of ordinary skill would have been motivated to incorporate the R-epimer of ciclesonide into the composition of Magee et al. with the reasonable expectation of providing a pharmaceutical composition that is efficacious in treating airway diseases and a composition that is readily absorbed with no systemic effects.

Claims 6-11 and 13-17 are rejected under 35 U.S.C. 103 (a) as being unpatentable over Keller et al. (U.S. 6,645,466 B1, previously submitted) in view of Magee et al. (2002/0111495 A1) and in further view of Calatayud et al. (U.S. 5,482,934).

The Magee and Calatayud references are as discussed above and incorporated by reference herein.

Keller et al. teaches dry powder formulations for inhalation (i.e. instant claim 6) containing a pharmaceutically effective carrier, pharmaceutically active compounds and magnesium stearate (see abstract and col. 4, lines 55-67). Keller et al. further teaches that magnesium stearate is added to dry powder formulations which contain a beta mimetic in the form of salt such as formoterol fumarate or formoterol tartrate (instant claims 9-10), and/or an anticholinergic and/or a corticosteroid including ciclesonide (instant claim 6; see col. 6, lines 52-64 and col. 7, lines 5-10). The amount of active compounds in the formulations can vary within wide ranges or from 0.1-10% (instant claim 16).

Keller et al. does not specifically teach a composition comprising administering daily ciclesonide and formoterol from separate pack units for successive inhalation. Similarly, Keller et al. does not teach a method of treating airway diseases or the inclusion of the R-epimer of ciclesonide in the composition.

As previously stated, Magee et al. teaches pharmaceutical composition for the treatment of airway diseases including asthma and COPD containing compounds of formula I along with ciclesonide and formoterol where they are sequentially administered, and where each component is formulated apart from each other into separate dosage forms (i.e. separate pack unit) which are ingested at consecutive times (i.e. successive times) by a patient with a significant time interval in between each ingestion (i.e. free combination administered successively; instant claims 6, 11, and 15; see pg. 92 paragraphs 0571-0572). Moreover, Magee et al., also teaches that these agents may be administered in various dosages and follow various treatment regimen depending upon a variety of factors (instant claims 11, 16-17; see pg. 99, paragraph 0671).

Calatayud et al. teaches synthesis of the mixture of ciclesonide with both the R and S epimers which are then further purified to obtain either of the epimers in a proportion of at least 99.9% (see col. 11, lines 21-61 and col. 17-18, table II, compound 9). Importantly, Calatayud et al. teaches that the R-epimer of ciclesonide possess high anti-inflammatory activity, high glucocorticoid activity and high therapeutic index (see col. 17-18, table 3 compound 9).

Thus, to one of ordinary skill in the art at the time of the invention would have found it obvious to substitute the R-epimer of Calatayud et al. into the composition of Keller et al. since Calatayud et al. teaches that the R-epimer of ciclesonide possess high anti-inflammatory activities. Likewise, it would have been obvious to one of ordinary skill at the time of the invention to vary the treatment regimen as taught by Magee et al. and use the aforementioned composition for the treatment of airway diseases since Magee et al. teaches the same type of composition for the treatment of asthma and COPD. Given that Keller teaches dry powder inhaler moisture resistant compositions containing ciclesonide and formoterol or their salts, and Magee et al. teaches pharmaceutical composition containing compounds of formula I along with ciclesonide and formoterol for the treatment of airway diseases including asthma and COPD, and Calatayud et al. teaches R-epimers of ciclesonide with high glucocorticoid activity, anti-inflammatory activity and minimal systemic effects, one of ordinary skill would have been motivated to incorporate the R-epimer of ciclesonide into the composition of Keller et al. and used such composition for the treatment of airway diseases as taught by Magee et al. with the reasonable expectation of providing a pharmaceutical composition that is efficacious in treating asthma and COPD and a composition that produces no systemic effects.

Conclusion

No claims are allowed.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Samira Jean-Louis whose telephone number is 571-270-3503. The examiner can normally be reached on 7:30-6 PM EST M-Th.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Sreeni Padmanabhan can be reached on 571-272-0629. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/S. J. L. /

Examiner, Art Unit 1617

05/06/2008

/SREENI PADMANABHAN/

Supervisory Patent Examiner, Art Unit 1617